PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number						
Effective January 1, 2003								JA-BWE/USI						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY		
TC	OTAL CLAIMS		20					RATE	F	EE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 37	5.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			ূ ⊘ minus 20=		. 0			X\$ 9=	-		OR	X\$18=		
INDEPENDENT CLAIMS					· 0			X42=				X84=		
MU	ILTIPLE DEPEN	NDENT CLAIM PE	RESENT					+140=			OR	+280=		
f the difference in column 1 is less than zero, enter "0" in column 2							ĺ	TOTAL	. 	25	OR	TOTAL		
CLAIMS AS AMENDED - PART II								, , , ,	ــــــــــــــــــــــــــــــــــــــ	<u>//</u>	Jon	OTHER	THAN	
	(Column 1) (Column 2) (Column 3)							SMAL	L ENT	ITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA	F	RATE	TIO	DDI- NAL EE		RATE	ADDI- TIONAL FEE	
	Total	20	Minus	**	<u>5</u>	2		X\$ 9⇒			OR	X\$18≈		
AM	Independent	* O	Minus	*** /		[]		X42=			OR	X84=		
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	1			. 290-		
											OR	+280≃ TOTAL		
			A	TOTA ADDIT. FE			OR.,	ADDIT. FEE						
	(Column 1) (Column 2) (Column 2) (Column 2) (Column 3)				(Column 3)	· -								
MENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	TIO	DI- NAL EE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	##		=		X\$ 9=			OR	X\$18≈		
AME	Independent	*	Minus	***		=		X42=	+			X84=		
Ľ	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM				+	\dashv	OR			
	+140=										OR	+280=		
							A	TOTA DDIT. FE			OR ,	TOTAL ADDIT. FEE		
		(Column 3)	1											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	AD TIOI FE	NAL		RATE	ADDI- TIONAL FEE	
Ž	Total	*	Minus	**		=		X\$ 9=	1		OR	X\$18=		
ME	Independent	*	Minus	Red Re		=		X42=	+		Ì			
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								4—		OR	X84=	<u> </u>	
+140=											OR	+280=	ĺ	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR A	TOTAL ADDIT, FEE		
		mber Previously Paid ober Previously Paid								ate box				